PTO/SB/06 (08-03)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application or Docket Number 09//39330		
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MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						Į	+ \$=		OR	+ \$=	
If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL	L	OR	TOTAL	L
CLAIMS AS AMENDED - PART II											
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├		(Column 1) CLAIMS		(Column 2) HIGHEST	(Column 3)	i	·		i		
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* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".											
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Reviews Red For" (Total or Independent is the highest gumber (gund in the appropriate box in column 1.											

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